

REMARKS

Claims 16-18, 20, 22, and 25-31 are pending in this application. By this Amendment, applicants have canceled claims 19 and 21 and added new claims 29-31. Claim 16 has been amended to differentiate applicant's invention from the prior art. Support for the amendment to claim 16 and for the added new claims 29-31 may be found in the specification in Example 1 (page 2 column 2, [0040]-[0044]) which states that "Four HIV-infected patients under HAART regimen and presenting lipodystrophy syndrome were administered 4 grams/day of a tuna oil with a DHA content of 70%. After three months' administration of DHA to said patients, the following discoveries were made, even taking account of the short period of administration: 1. Partial reversal of body-fat distribution disorders, with 1.1 improvement in facial fat loss; 1.2 improvement in fat loss in buttocks and extremities; 1.3 no increase in intra-abdominal fat."

Accordingly, applicants respectfully request that the Examiner enter consider this amendment as it is supported by the original disclosure.

Rejection Under 35 USC § 103

The Examiner maintained the rejection of claims 16-22 and 25-28 under 35 U.S.C. 103(a) as unpatentable over Holstein et al. in view of Connor et al. and stated that Applicants' argument that treating one or more symptoms of lipodystrophy is not the same thing as treating lipodystrophy itself, is not persuasive. In making this rejection, the Examiner indicates that hyperlipidemia can be reasonably construed as a symptom of lipodystrophy.

In response, applicants note that claim 16 has been amended to limit the treatment of patients with lipodystrophy to only a body-fat distribution disorder, which is the most noticeable symptom of lipodystrophy and, importantly, is not present in hyperlipidemia. This limitation renders automatically moot the objections based on Holstein et al. in view of Connor et al. Applicants maintain that it was certainly not obvious for the skilled in the art, when departing from the teachings of Connor et al, that the administration of DHA would be indeed effective in reversing body-fat maldistribution including improving facial fat loss or fat loss in buttocks and extremities, and no increase in intra-abdominal fat.

In view if the remarks above, applicants maintain that Holstein et al. in view of Connor et al. do not render obvious claim 16 as now amended or claims dependent therefrom, and respectfully request that the Examiner reconsider and withdraw this ground of rejection.

Reconsideration and allowance of all the claims herein are respectfully requested.

Respectfully submitted,
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